

**Sync Speed Inc.**  
 10 E. Manoa Road,  
 Havertown PA 19083  
 (610)659-1033 Chris Kellett  
 (610)909-2512 Sonya Klimuk

**Credit Card/ Pre –Payment Authorization Form**

This form provides security for our customers who are using a credit card to place an order by phone. Please read over and complete this document carefully to confirm that you have approved the following charges.

|                         |                                |
|-------------------------|--------------------------------|
| <b>Bill to:*</b>        | <b>Ship to: (if different)</b> |
| Company: _____          | Company: _____                 |
| Attention: _____        | Attention: _____               |
| Address: _____          | Address: _____                 |
| City, State, Zip: _____ | City, State, Zip: _____        |
| Phone: _____            | Phone: _____                   |

**\*Please note that any insurance or tax exempt certificated used in this sale or rental must match the "Bill to" Company or will be considered invalid.**

Production Title: \_\_\_\_\_  
 Pre-Authorization Amount \$ \_\_\_\_\_

Credit Card Type

American Express      Visa  
 Master Card              Discover

|              |           |
|--------------|-----------|
| Subtotal     | \$        |
| Tax          | \$        |
| Shipping     | \$        |
| <b>Total</b> | <b>\$</b> |

Name on Card: \_\_\_\_\_  
 Cardholders Address: \_\_\_\_\_  
 Cardholders Phone #: \_\_\_\_\_  
 Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
 CVV2# \_\_\_\_\_ (MC/Visa/Disc: last 3 digits signature strip; Amex: 4 numbers on front)

*I authorize Sync Speed, Inc. to charge my credit card for the services being provided for this order. If I am charging this for business use, I am personally responsible for this charge. I also understand that I am responsible for all shipping/ handling charges, missing and /or damaged equipment and costs related to my order.*

Signature: (of Cardholder ONLY) \_\_\_\_\_  
 Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*THIS FORM MUST BE ACCOMPANIED BY COPY OF CARD (FRONT AND BACK) AS WELL AS CARDHOLDERS PHOTO ID\*\***

Thank you for your cooperation.

